

Last Updated: 6/14/2019

This quick reference guide describes how to complete the DocuSign VPR Request Form.

Review Important Information

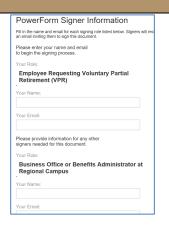
- Retirement Transition Options (S-6) standard
- <u>Phased Retirement Alternatives VPR web page</u> Please consider reviewing:
 - o VPR Example Forms
 - o Frequently Asked Questions
 - VPR Terms and Definitions
- Review request and potential workload with Supervisor to gain support prior to request
- · Review information with Business Office and confirm eligibility

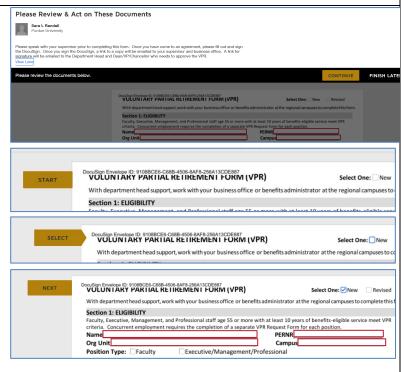
Complete Form

- 1. Access Online Request Form
- 2. Complete Signature information (name and email)
 - a. You
 - b. Business office/payroll center
 - c. Department Head
 - d. Dean, if applicable

Anything with a red * is required.

- 3. Complete required fields by following Golden Help tabs.
 - a. Select New
 - b. Complete Name, PERNR, Org Unit, Campus
 - c. Complete Position Type (Faculty or Executive/Management/Professional)











4. Complete Request Details Section 2: REQUEST DETAILS -- for revisions, note changes only --The VPR duration is at the discretion of the unit. Maximum allowed is up to 5 (five) years. a. Start and End dates Start date: 1 1 2020 End date: 1 1 /2023 Please indicate current payfrequency: b. VPR work time (%) Academic Year OR Fiscal Year (10, 11, or 12 months) c. Summarize work adjustments that Please indicate percentage of work time planned for VPR transition: 50 for entire term of VPR period OR ☐ Variable Schedule (Below indicate % of work proposed) will align with reduced schedule; VPR Year 1 VPR Year 2
Fiscal Year 2020 Fiscal Year 2021 VPR Year 3 VPR Year 4 Fiscal Year 2023 Fiscal Year Fiscal Year attach additional documentation if Fall Half | Spring Half | Half needed Fall Half = 1st Semester (academic year pay cycle) or July 1st through December 31st (fiscal year pay cycle) Spring Half = 2nd Semester (academic year pay cycle) or January 1st through June 30th (fiscal year pay cycle) Summer session work for AY faculty/staff is permitted and may be arranged as needed but is not part of the VPR schedule. Summarize work adjustments proposed that will align with your reduced schedule: If the proposed work schedule cannot be captured above, a concise description of any special notes, conditions, work period(s) and associated effort must be described below. (Attach additional page if necessary.) xxxxxxxxxxxxxxxxx 0 My employment may not be supplemented by employment elsewhere at the University. I understand I may retire completely anytime during the VPR period. 5. Click 'Sign' to sign form performance. Section 3: REVIEWS AND APPROVAL 6. Click Adopt and Sign to accept signature APPROVED BY: equested By: Cindv Name Dept. Head Signature Date Dean/VP/Chancellor Signature Signature Date 6/14/2019 Date West Lafayette Retirement Approver Adopt Your Signature Confirm your name, initials, and signature. * Required Full Name* Initials Cindy SELECT STYLE DRAW PREVIEW Change Style Cindy 8A38359A35DC468 By selecting Adopt and Sign, I agree that the signature and initials will be the electronic representation of my signature and initials for all purposes when I (or my agent) use them on documents, including legally binding contracts - just the same as a pen-and-paper signature or initial. ADOPT AND SIGN CANCEL





Completing VPR Request Form

